

MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ORIGINAL OR AMENDED

	ORM FOR CANDIDATE COMMITTEES
1. Committee ID#: 0/50358 2. Type of Filing:	10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box, the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be
Original	automatically lost if the committee exceeds the \$1,000 threshold.
Amendment to Items: Eff. Date: 3. Full Name of Committee (must include Candidate's first and last name): Comm To Elect Dick Gromask, Fire	11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)
Board Commission	a. Official Depository
4a. Candidate Full Name (Last, First, M.I.):	CITIZEN BANK
4b. Political Party (if applicable):	LINDROS, MER DE SHE
4c. County of Residence: ∠ o y	N 177 - 17
4d. Office Sought (Check one):	b. Secondary Depository
Полити	
Governor Lt. Governor State Senator	gaments.
State Rep. Sec. of State Attorney Gen.	
State Bd. of Ed. UofM Reg. MSU Trustee	12This item applies only to Gubernatorial Candidate
WSU Gov. Supreme Court Appeals Court Circuit Court District Court Probate Court	Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.
Municipal Court	13. ELECTRONIC FILING: This item applies to committees that file with
Local or other please specify: Road Commission	the Michigan Department of State Bureau of Elections only and does not
4e. District/Circuit # or Jurisdiction:	apply to Candidate Committees that file with the County Clerk's office.
5. Date Committee was Formed: 1-19-06	The Campaign Finance Act requires any committee that files with the
6a. Committee Phone #: <u>983 8756</u> 282	Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to
6b. Committee Fax #:	file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.
6c. Committee E-mail Address: Richard Gromaski @ (อวิโอเลา	к чт,
6d. Committee Website Address:	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	** OR **
3075 E Coggin Rd	Committee did not spend or receive or does not expect to spend
PINCONNING MI 48650	or receive in excess of \$20,000 and would like to file electronically voluntarily.
7b. Complete Comm. Street Address (May not be PO Box):	14. Verification: I/We certify that all reasonable diligence was used
2075 E. COTPIN Rd	in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or
Pincouning MI 48650	belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and
8. Treasurer Name and Complete Address:	completeness of each statement filed electronically by the committee.
Richard Gromaski	I/We certify that all reasonable diligence will be used in the
2075 E Cogg, N Rd	preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and
	complete to the best of my/our knowledge or belief. (Sign Name
PINCONING, M. 45650	and Date)
Phone #: 989 879 6382	
E-mail Address:	
9. Designated Record Keeper Name and Complete Address:	& P O
	Current Treasurer
Phone #:	
E-mail Address:	Designated Record Keeper (Required only if filing electronically)